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CONFIRMATION NO. 4124

SERIAL NUMBER 09/583,747	FILING DATE 05/31/2000  RULE	CLASS 717	GROUP ART UNIT 2191	ATTORNEY DOCKET NO. 50277-450
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## APPLICANTS

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Verified QN

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/160,759 10/21/1999  
and claims benefit of 60/185,136 02/25/2000  
and claims benefit of 60/185,139 02/25/2000  
and claims benefit of 60/185,138 02/25/2000  
and claims benefit of 60/185,134 02/25/2000  
and claims benefit of 60/185,137 02/25/2000  
and claims benefit of 60/185,135 02/25/2000

Verified QN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None Verified QN

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/31/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Signature</u> Initials				

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## TITLE

Diagnostic method and article for indentifying significant events

☐ All Fees☐ 1.16 Fees ( Filing )

<p>FILING FEE</p> <p>RECEIVED</p> <p>804</p>	<p>FEES: Authority has been given in Paper</p> <p>No. _____ to charge/credit DEPOSIT ACCOUNT</p> <p>No. _____ for following:</p>	<p><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time.)</p> <p><input type="checkbox"/> 1.18 Fees ( Issue )</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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